Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			25					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			25 minus 20=		* 5			X\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS			/ minus 3 =		* 3			X42=		OR	X84=	252
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2	1	TOTAL		OR	TOTAL	1082
CLAIMS AS AMENDED - PART II											OTHER	
	and a second second second	(Column 1)		(Colu		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL A 114	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	I CLAIM		.	+140=		OR	+280=	
								TOTAL		OR	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE			ADDIT. FEE	
		CLAIMS		HIGH	HEST		ז ר		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> -</u>	11	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		┙╽	+140=		OR	+280=	
								TOTAL		OB	TOTAL	
		52		ā	.0			ADDIT. FEE		On	ADDIT. FEE	
_		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	٦.			1		···
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-] [X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDEN			T CLAIM		J ├			UR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140= TOTAL		OR	+280=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT. FEE	
		nber Previously Pa					er fou	ind in the app	ropriate box	x in co	lumn 1.	